

RECEIVED

DEC 13 2010

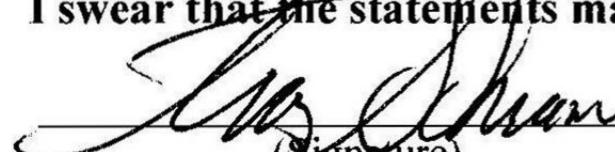
## STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation  
S.D. SEC. OF STATE

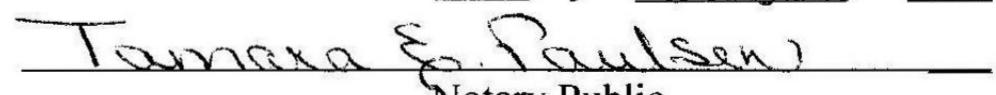
Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER		2. DATE	
<u>Bridgewater Tribune</u>		<u>10/1/10</u>	
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE	
<u>Weekly</u>	<u>52</u>	<u>\$2641/28.30/31.00</u>	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)			
<u>P.O. Box 250, Bridgewater, McCook County, SD 57319-0250</u>			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)			
<u>P.O. Box 220, Salem, McCook County, SD 57058-0220</u>			
6. FULL NAME OF PUBLISHER:			
<u>Troy Schwans</u>			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)			
FULL NAME		COMPLETE MAILING ADDRESS	
<u>Schwans Publications Inc.</u>		<u>PO Box 220, Salem, SD 57058-0220</u>	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)			
<u>None</u>			
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)		<u>580</u>	<u>580</u>
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and counter sales.		<u>21</u>	<u>17</u>
2. Mail Subscription (Paid and or requested)		<u>347</u>	<u>338</u>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		<u>368</u>	<u>355</u>
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS		<u>55</u>	<u>55</u>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		<u>0</u>	<u>0</u>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		<u>423</u>	<u>410</u>
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing		<u>157</u>	<u>170</u>
2. Return from News Agents		<u>0</u>	<u>0</u>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)		<u>580</u>	<u>580</u>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public  
I swear that the statements made by me are true, correct, and complete:

  
(Signature)

State of South Dakota )  
County of McCook )  
(Seal)

Sworn to before me this 1<sup>st</sup> day of October 2010  
  
Tamara E. Paulsen  
Notary Public

My commission expires: 08-09-14

